Attorney or Party Name, Address, Telephone & FAX Numbers, State Bar Number & Email Address	FOR COURT USE ONLY
NEXUS BANKRUPTCY Benjamin Heston (297798) 3090 Bristol Street #400 Costa Mesa, CA 92626 Tel: 949.312.1377 Fax: 949.288.2054 ben@nexusbk.com	
☐ Debtor appearing without attorney ☑ Attorney for Debtor(s)	
UNITED STATES BA	NKRUPTCY COURT
CENTRAL DISTRICT OF CALIF	ORNIA – RIVERSIDE DIVISION
la sa	CASE NUMBER: 6:23-bk-12440-RB
In re:	CHAPTER 13
TODD DIEDRRICH, and	
ASHLEY ESQUIVEL,	MOTION UNDER LBR 3015-1(n) AND (w) TO MODIFY PLAN OR SUSPEND PLAN PAYMENTS
Debtor(s).	[No Hearing Required]

- 1. The Debtor hereby moves this court to modify the confirmed Chapter 13 Plan or suspend plan payments, as set forth in detail below.
- 2. The purpose of this motion is to (*check all that apply*):
 - ☑ Cure the delinquency.
 - ☐ Address the expiration of the plan.
 - ☐ Cure the infeasibility of the plan.
 - Modify the amount of the plan payment, the length of the plan and/or the percentage to be paid to unsecured creditors because of a change in financial circumstances.
- 3. Terms of original confirmed Chapter 13 plan:

The Order Confirming Plan was entered on 10/4/2023.

Plan payment amount(s): \$815 per month for month 1;

\$4,212 per month for months **2 - 60**.

Length of plan: 60 months.

Percentage paid to Class 5 general unsecured creditors: 100%.

4. There have been **0** previous modification or suspension orders.

Plan payments have been suspended for **0** months and/or the plan has been extended for **0** months.

5.	<i>modific</i> Plan pa Length	nt plan terms (complete this section if the confirmed chap ication or suspension order): ayment amount(s): \$ per month. n of plan: months. ntage paid to Class 5 general unsecured creditors:%.	oter 13 plan has been subject to a previous
6.	Sus Ext Red	sed modification: spend (indicate number of plan payments) <u>2</u> plan payment tend the term by (indicate number of months) month(s). duce the term by (indicate number of months) month(s) crease the plan payment from <u>\$</u> to <u>\$</u> from (date) educe the plan payment from <u>\$4,212</u> to <u>\$3,785</u> from (date) <u>8</u>). to (<i>date</i>)
7.	have checked before the control of t	the Order Confirming Plan or the last modification or suspenshanged in the following respect: r, Todd Diedrich, works as a plumber and his business if we in Montana, he's been having to fly back and forth in its, work has slowed down and he has not been able to we able to take on any emergency plumbing jobs. As a result it is a result in its and the state of we have a started her job working for the State of Montana and Colorado but y Esquivel started her job working for the State of Montana abachelor's degree which is usually required for her post with the expectation that she would return to school and y caretaker for their four kids, she did not have time to be as since been receiving unemployment income. The recently moved in with Ashley's mother in order to current or utilities. They have also cut down on all of their er 13 plan payment. As a result, their expenses have been second in the started for their expenses have been second in the started for the started for the started for the started for their expenses have been second for the started for	s located in California. Since he and his family order to take on work. Over the past few work nearly as much as he used to and has not lt, his income has dropped down to been prior to the slowdown. He has been has not yet been hired. Ana in January of 2023. Although the did not sition, her employer put her on a probationary and obtain this degree. Since Ashley is the take classes and she was let go from her job. At down on expenses since they do not need to rother expenses so that they can prioritize their
8.	If this m	motion is granted, the last plan payment due would be payab	ole <u>60</u> months after the first plan payment was due.
9.	If this m	motion is granted:	
	a.	☐ There will be no change in the percentage paid to Class OR	
	b.	☑ The percentage paid to Class 5 general unsecured cre	editors will change from 100% to 0%.
	Date:	January 9, 2024	/s/Benjamin Heston Benjamin Heston Attorney for Debtor
	I declare	e under penalty of perjury that the following is true and correct.	
	Date:		Todd Diedric
	Date:	January 9, 2024	Ashley Esquive Joint Debtor

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Fill in this information	on to identify your case	:		
Debtor 1	Todd		Diedrich	
	First Name	Middle Name	Last Name	
Debtor 2	Ashley		Esquivel	
(Spouse, if filing)	First Name	Middle Name	Last Name	
United States Banl	kruptcy Court for the:		Central District of California	<u> </u>
Case number (if known)	6:23-bk-1244	0-RB		

Official Form 106I

Schedule I: Your Income

12/15

Be as complete and accurate as possible. If two married people are filing together (Debtor 1 and Debtor 2), both are equally responsible for supplying correct information. If you are married and not filing jointly, and your spouse is living with you, include information about your spouse. If you are separated and your spouse is not filing with you, do not include information about your spouse. If more space is needed, attach a separate sheet to this form. On the top of any additional pages, write your name and case number (if known). Answer every question.

		,	, , ,							
Pa	rt 1: Describe Employment									
1.	Fill in your employment information.		Debtor 1				Debt	tor 2 or non-	-filing spo	ouse
	If you have more than one job, attach a separate page with information about additional employers.	Employment status Occupation	Employed	√ N	ot Employe	ed	□ _{Emplo}	oyed ଏ Not	Employe	d
	Include part time, seasonal, or self-employed work.	Employer's name Employer's address								
	Occupation may include student or homemaker, if it applies.	Employer 3 address	Number Stree	t			Number	Street		
			City		State	Zip Code	City		State	Zip Code
		How long employed there?	?		_				_	
Pa	art 2: Give Details About Mon	nthly Income								
	Estimate monthly income as of the unless you are separated.	ne date you file this form. If y	ou have nothin	g to r	eport for ar	ny line, write	\$0 in the space	e. Include yo	our non-fil	ing spouse
	If you or your non-filing spouse ha more space, attach a separate she		combine the inf	orma	tion for all	employers fo	r that person o	n the lines b	elow. If yo	ou need
					For	Debtor 1	For Debtor			
2.	List monthly gross wages, salary deductions.) If not paid monthly, c			2.		\$0.00		\$0.00		
3.	Estimate and list monthly overting	ne pay.		3.	+	\$0.00	+	\$0.00		
4.	Calculate gross income. Add line	2 + line 3.		4.		\$0.00		\$0.00		

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 Debtor 1
 Todd
 Diedrich

 Debtor 2
 Ashley
 Esquivel

 First Name
 Middle Name
 Last Name

Case number (if known) 6:23-bk-12440-RB

			For Debtor 1		Debtor 2 or n-filing spouse	
	Copy line 4 here→	4.	\$0.00	_	\$0.00	
5.	List all payroll deductions:					
	5a. Tax, Medicare, and Social Security deductions	5a.	\$0.00		\$0.00	
	5b. Mandatory contributions for retirement plans	5b.	\$0.00		\$0.00	
	5c. Voluntary contributions for retirement plans	5c.	\$0.00	_	\$0.00	
	5d. Required repayments of retirement fund loans	5d.	\$0.00		\$0.00	
	5e. Insurance	5e.	\$0.00		\$0.00	
	5f. Domestic support obligations	5f.	\$0.00		\$0.00	
	5g. Union dues	5g.	\$0.00		\$0.00	
	5h. Other deductions. Specify:	5h.	+ \$0.00	+	\$0.00	
6.	Add the payroll deductions. Add lines 5a + 5b + 5c + 5d + 5e +5f + 5g + 5h.	6.	\$0.00		\$0.00	
o. 7.	Calculate total monthly take-home pay. Subtract line 6 from line 4.	7.	\$0.00	_	\$0.00	
	• • • • • • • • • • • • • • • • • • • •	7.		_	\$0.00	
8.	List all other income regularly received:					
	8a. Net income from rental property and from operating a business, profession, or farm					
	Attach a statement for each property and business showing gross					
	receipts, ordinary and necessary business expenses, and the total monthly net income.	8a.	\$5,100.00		\$0.00	
	8b. Interest and dividends	8b.	\$0.00	_	\$0.00	
	8c. Family support payments that you, a non-filing spouse, or a dependent regularly receive	ob.	Ψ0.00	_	Ψ0.00	
	Include alimony, spousal support, child support, maintenance, divorce settlement, and property settlement.	8c.	\$0.00		\$0.00	
	8d. Unemployment compensation	8d.	\$1,725.00	_	\$0.00	
	8e. Social Security	8e.	\$0.00	_	\$0.00	
	•	oe.	φο.σο_	_	Ψ0.00	
	8f. Other government assistance that you regularly receive Include cash assistance and the value (if known) of any non-cash					
	assistance that you receive, such as food stamps (benefits under the Supplemental Nutrition Assistance Program) or housing subsidies.					
	Specify:	8f.	\$0.00		\$0.00	
	8g. Pension or retirement income	8g.	\$0.00	_	\$0.00	
	8h. Other monthly income. Specify:	8h.	+\$0.00	+_	\$0.00	
9.	Add all other income. Add lines 8a + 8b + 8c + 8d + 8e + 8f +8g + 8h.	9.	\$6,825.00		\$0.00	
10.	Calculate monthly income. Add line 7 + line 9.					
10.	Add the entries in line 10 for Debtor 1 and Debtor 2 or non-filing spouse	10.	\$6,825.00	+	\$0.00	\$6,825.00
11.	State all other regular contributions to the expenses that you list in Sched	lule J.				
	Include contributions from an unmarried partner, members of your household	d, your d	ependents, your roomm	ates, a	nd other	
	friends or relatives. Do not include any amounts already included in lines 2-10 or amounts that a	re not av	vailable to pay expenses	s listed	in Schedule J.	
	Specify:			_	11	\$0.00
12.	Add the amount in the last column of line 10 to the amount in line 11. The amount on the Summary of Your Assets and Liabilities and Certain Statistical		-	ncome.	. Write that	\$6.825.00
	,		, "			Combined monthly income
13.	Do you expect an increase or decrease within the year after you file this fo	orm?				
	√ No.					
	Yes. Explain:					

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Diedrich Debtor 1 Todd Debtor 2 Ashley **Esquivel** Case number (if known) 6:23-bk-12440-RB First Name Middle Name Last Name 8a. Attached Statement **Business Income** FINANCIAL REVIEW OF THE DEBTOR'S BUSINESS (NOTE: ONLY INCLUDE information directly related to the business operation.) PART A - ESTIMATED AVERAGE FUTURE GROSS MONTHLY INCOME: 1. Gross Monthly Income: \$1,300.00 PART B - ESTIMATED AVERAGE FUTURE MONTHLY EXPENSES: Payments to be Made Directly by Debtor to Secured Creditors for Pre-Petition **Business Debts** TOTAL PAYMENTS TO SECURED CREDITORS \$0.00 Other Expenses TOTAL OTHER EXPENSES \$0.00 \$0.00 4. TOTAL MONTHLY EXPENSES(Add item 2 - 21) PART C - ESTIMATED AVERAGE NET MONTHLY INCOME: 5. AVERAGE NET MONTHLY INCOME(Subtract item 22 from item 1) \$1,300.00

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Debtor 1 Debtor 2	Todd Ashley		Diedrich Esquivel	Case number (if known) 6:23-bk-12440-RB
	First Name	First Name Middle Name Last Name		· · · · · · · · · · · · · · · · · · ·
8a. Attache	d Statement			
			Rental Income	
1. Gr	oss Monthly Income	:		\$3,800.00
2. TC	TAL EXPENSES			\$0.00
3. AV	ERAGE NET MONT	THLY INCOME		\$3,800.00

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Fill in this information	n to identify your case	:		
Debtor 1	Todd		Diedrich	
	First Name	Middle Name	Last Name	Check if this is:
Debtor 2	Ashley		Esquivel	☑ An amended filing
(Spouse, if filing)	First Name	Middle Name	Last Name	A supplement showing postpetition chap expenses as of the following date:
United States Bank	ruptcy Court for the:		Central District of California	
Case number	6:23-bk-1244	D-RB		MM / DD / YYYY
(if known)				

Official Form 106J

Schedule J: Your Expenses

12/15

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. If more space is needed, attach another sheet to this form. On the top of any additional pages, write your name and case number (if known). Answer every question

	Ω			
Part 1: Describe Your Househol 1. Is this a joint case? No. Go to line 2. Yes. Does Debtor 2 live in a sep No.		Congress Household of Dobtor 2		
 Do you have dependents? Do not list Debtor 1 and Debtor 2. 	□ No ☑ Yes. Fill out this information	Dependent's relationship to Debtor 1 or Debtor 2	Dependent's age	Does dependent live with you?
Do not state the dependents'	for each dependent	Child	10	. □ _{No.} ☑ _{Yes.}
names.		Child	15	. □ _{No.} ☑ _{Yes.}
		Child	12	. □ _{No.} ☑ _{Yes.}
		Child	11	. □ _{No.} ☑ _{Yes.}
				. □No. □Yes.
Do your expenses include expenses of people other than yourself and your dependents?	☑No □ _{Yes}			
Estimate your expenses as of your ba date after the bankruptcy is filed. If thi Include expenses paid for with non-ca	nkruptcy filing date unless you are s is a supplemental <i>Schedule J</i> , chash government assistance if you k	eck the box at the top of the form an mover the value of	id fill in the applic	
Estimate your expenses as of your ba date after the bankruptcy is filed. If thi Include expenses paid for with non-ca such assistance and have included it	nkruptcy filing date unless you are is a supplemental <i>Schedule J</i> , chash government assistance if you keen on <i>Schedule I: Your Income</i> (Official)	eck the box at the top of the form an mow the value of al Form 106l.)	nd fill in the applic	cable date.
Estimate your expenses as of your ba date after the bankruptcy is filed. If thi Include expenses paid for with non-ca such assistance and have included it 4. The rental or home ownership exp	nkruptcy filing date unless you are is a supplemental <i>Schedule J</i> , chash government assistance if you keen on <i>Schedule I: Your Income</i> (Official)	eck the box at the top of the form an mow the value of al Form 106l.)	d fill in the applic	able date.
Include expenses paid for with non-ca such assistance and have included it 4. The rental or home ownership exp for the ground or lot.	nkruptcy filing date unless you are is a supplemental <i>Schedule J</i> , chash government assistance if you keen on <i>Schedule I: Your Income</i> (Official)	eck the box at the top of the form an mow the value of al Form 106l.)	d fill in the applic	able date.
Estimate your expenses as of your ba date after the bankruptcy is filed. If thi Include expenses paid for with non-ca such assistance and have included it 4. The rental or home ownership exp for the ground or lot. If not included in line 4:	nkruptcy filing date unless you are s is a supplemental <i>Schedule J</i> , ch ash government assistance if you k on <i>Schedule I: Your Income</i> (Official penses for your residence. Include f	eck the box at the top of the form an mow the value of al Form 106l.)	44a4b	ur expenses \$0.00
Estimate your expenses as of your ba date after the bankruptcy is filed. If thi Include expenses paid for with non-ca such assistance and have included it of 4. The rental or home ownership exp for the ground or lot. If not included in line 4: 4a. Real estate taxes	nkruptcy filing date unless you are s is a supplemental <i>Schedule J</i> , ch ash government assistance if you k on <i>Schedule I: Your Income</i> (Official penses for your residence. Include for the supplemental supplement	eck the box at the top of the form an mow the value of al Form 106l.)	4. 4a.	\$0.00

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 Debtor 1
 Todd
 Diedrich

 Debtor 2
 Ashley
 Esquivel
 Case number (if known) 6:23-bk-12440-RB

 First Name
 Middle Name
 Last Name

	Yo	ur expenses
Additional mortgage payments for your residence, such as home equity loans	5.	\$0.00
Utilities:		
6a. Electricity, heat, natural gas	6a. —	\$0.00
6b. Water, sewer, garbage collection	6b	\$0.00
6c. Telephone, cell phone, Internet, satellite, and cable services	6c	\$300.00
6d. Other. Specify:	6d	\$0.00
Food and housekeeping supplies	7	\$1,100.00
Childcare and children's education costs	8.	\$0.00
Clothing, laundry, and dry cleaning	9.	\$150.00
). Personal care products and services	10.	\$150.00
. Medical and dental expenses	11.	\$225.00
 Transportation. Include gas, maintenance, bus or train fare. Do not include car payments. 	12.	\$450.00
3. Entertainment, clubs, recreation, newspapers, magazines, and books	13.	\$0.00
4. Charitable contributions and religious donations	14.	\$0.00
 Insurance. Do not include insurance deducted from your pay or included in lines 4 or 20. 		
15a. Life insurance	15a. —	\$0.00
15b. Health insurance	15b	\$0.00
15c. Vehicle insurance	15c	\$65.00
15d. Other insurance. Specify:	15d	\$0.00
Taxes. Do not include taxes deducted from your pay or included in lines 4 or 20.	16.	\$0.00
Specify:	16.	φυ.υυ
7. Installment or lease payments:		
17a. Car payments for Vehicle 1 2015 Ford F150 Supercrew Cab XLT	17a	\$0.00
17b. Car payments for Vehicle 2	17b	\$0.00
17c. Other. Specify:	17c	\$0.00
17d. Other. Specify:	17d	\$0.00
3. Your payments of alimony, maintenance, and support that you did not report as deducted from your pay on line 5, Schedule I, Your Income (Official Form 106I).	18.	\$0.00
		ψ3.00
Other payments you make to support others who do not live with you. Specify:	19.	\$0.00
Other real property expenses not included in lines 4 or 5 of this form or on Schedule I: Your Income	e.	
20a. Mortgages on other property	20a	\$0.00
20b. Real estate taxes		\$0.00
20c. Property, homeowner's, or renter's insurance		\$0.00
20d. Maintenance, repair, and upkeep expenses	20d.	\$0.00
20e. Homeowner's association or condominium dues	20e.	\$0.00

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Debtor 1 Debtor 2		Todd Ashley		Diedrich Esquivel	Case number (ii	Case number (if known) 6:23-bk-12440-RB			
		First Name	Middle Name	Last Name					
21.	Other. Spe	cify:	Saving for move		21.	+ \$450.00			
22.	2. Calculate your monthly expenses.								
	22a. Add lines 4 through 21.			22a.	\$3,040.00				
	22b. Copy line 22 (monthly expenses for Debtor 2), if ar			f any, from Official Form 106J-2	22b.	\$0.00			
	22c. Add line 22a and 22b. The result is your monthly ea			y expenses.	22c.	\$3,040.00			
23.	Calculate y	your monthly net	income.						
	23а. Сору	line 12 (your com	bined monthly income) t	rom Schedule I.	23a.	\$6,825.00			
	23b. Copy	your monthly exp	enses from line 22c abo	ve.	23b. -	\$3,040.00			
	23c. Subtra	act your monthly e	expenses from your mor	thly income.	Γ	Φο 7 05 00			
	The r	esult is your <i>moni</i>	thly net income.		23c.	\$3,785.00			
24.	Do you ex	pect an increase	or decrease in your exp	enses within the year after you file	e this form?				
				car loan within the year or do you of a modification to the terms of you					
	√ No. ☐ Yes.	None							